

CERTIFICATE OF LIABILITY INSURANCE

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DATE (MM/DD/YYYY
07/19/2023

						077	19/2023	
THIS CERTIFICATE IS ISSUED AS A CERTIFICATE DOES NOT AFFIRMAT BELOW. THIS CERTIFICATE OF INS	IVELY OR SURANCE	NEGATIVELY AMEND, DOES NOT CONSTITUT	EXTEND OR ALT	ER THE CO	VERAGE AFFORDED B	Y THE	POLICIES	
REPRESENTATIVE OR PRODUCER, AI						<u> </u>		
IMPORTANT: If the certificate holder in If SUBROGATION IS WAIVED, subject	to the ter	ms and conditions of th	e policy, certain p	olicies may ı	•			
this certificate does not confer rights t	o the cert	ificate holder in lieu of su						
PRODUCER Willis Towers Watson Midwest, Inc.			CONTACT NAME: Willis Towers Watson Certificate Center					
c/o 26 Century Blvd			PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378					
P.O. Box 305191	E-MAIL ADDRESS: certificates@willis.com							
Nashville, TN 372305191 USA			INSURER(S) AFFORDING COVERAGE				NAIC #	
			INSURER A: RLI Insurance Company				13056	
INSURED			INSURER B: Lexington Insurance Company				19437	
American Transport, Inc.; ATI Trucking, LLC; American Wind Transport								
Group, LLC 200 Airside Drive, Suite 260			INSURER C :					
Moon Township, PA 15108			INSURER D :					
			INSURER E :					
			INSURER F :					
		NUMBER: W29684642			REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RE CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	equiremen Pertain,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY CONTRACT ED BY THE POLICIE	OR OTHER I	DOCUMENT WITH RESPEC	ст то \	WHICH THIS	
INSR TYPE OF WOUR ANOT	ADDL SUBR		POLICY EFF	POLICY EXP	LIMIT	'e		
LTR TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY	INSD WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)		-	1,000,000	
					EACH OCCURRENCE DAMAGE TO RENTED	\$		
					PREMISES (Ea occurrence)	\$	50,000	
A					MED EXP (Any one person)	\$	5,000	
		LGL0012094	04/01/2023	08/01/2024	PERSONAL & ADV INJURY	\$	1,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	2,000,000	
		ЛЛЛ			PRODUCTS - COMP/OP AGG	\$ \$	1,000,000	
					COMBINED SINGLE LIMIT		1 000 000	
					(Ea accident)	\$	1,000,000	
					BODILY INJURY (Per person)	\$		
A X OWNED AUTOS ONLY SCHEDULED AUTOS		LFT0013314	04/01/2023	08/01/2024	BODILY INJURY (Per accident)	\$		
HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$		
						\$		
UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$		
EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$		
					AGGREGATE			
DED RETENTION \$					PER OTH- STATUTE FR	\$		
AND EMPLOYERS' LIABILITY Y / N					PER OTH- STATUTE ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N / A				E.L. EACH ACCIDENT	\$		
(Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$		
DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$		
B Motor Truck Cargo		51567017	08/01/2023	08/01/2024	Limit:	\$100,0	000	
Other deductibles may apply as								
per policy terms and conditions								
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICI	LES (ACORD	101, Additional Remarks Schedu	le, may be attached if mor	e space is require	ed)			
Tariff rules and regulations lim	it carri	er's liability to a	max of \$1.50/1	b for each	article transporte	d, or	\$0.10/lb	
for shipments of used or recondi	tioned g	oods. If value in e	xcess of these	limits is	declared, see tarif	f rul	es and	
regulations for complete procedures to which shipper is subject. It is agreed that the carrier's liability on any								
shipments tendered by a certificate holder is limited to an amount not to exceed the limit listed above.								
Higher limits are available upon request and are effective upon confirmation in writing from the corporate								
headquarters of the motor carrier. Drivers or agents have no authority to amend wording or limits.								
CERTIFICATE HOLDER CANCELLATION								
			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
			AUTHORIZED REPRESENTATIVE					
Evidence of Insurance	Connie S. Harris							

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